CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE
01 MAY 25 AM 8:47
SECRETARY OF STATE
STATE OF IDAHO

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name:

1. The assumed business name which the undersigned use(s) in the transaction of business is:

   Christensen Insurance Services

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
Steven Christensen	583 E. Spring Creek Rd., Burley, ID

3. The general type of business transacted under the assumed business name is:
   (mark only those that apply)

☐ Retail Trade	☐ Manufacturing	☐ Transportation and Public Utilities
☐ Wholesale Trade	☐ Agriculture	☐ Finance, Insurance, and Real Estate
☒ Services	☐ Construction	☐ Mining

4. The name and address to which future correspondence should be addressed:

   as above

   Phone number (optional): _____

5. Name and address for this acknowledgment copy is (if other than # 4 above):

   DL Evans Bank att: Diane
   2281 Overland Drive, P.O. Box 1188
   Burley, Idaho 83318

Submit Certificate of Assumed Business Name and **$20.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Steven Christensen

Printed Name: Steven Christensen

Capacity: Owner

(see instruction # 8 on back of form)

Revision 2/97

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Secretary of State use only

IDAHO SECRETARY OF STATE

05/25/2001 09:00
CK: 977689 CT: 146835 BH: 399258

1 @ 20.00 = 20.00 ASSUM NAME # 2

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